DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10012828-1

As a below named in		•				
My residence/post of	ffice addres	ss and citizenship are	as stated below next	to my name;		
patent is sought on t	rai names : he inventio	are listed below) of t n entitled:	only one name is listed the subject matter wh	d below) or an o nich is claimed	original, first and and for which a	
Removable Media St	orage Devic	ce for a Data Storage	System			
the specification of v	which is att	ached hereto unless	the following box is ch	necked:		
() was filed on Number	and w	as US Appl as amended on	lication Serial No. or Po	CT International pplicable).	Application	
I hereby state that including the claims,	l have revi	ewed and understoo	d the contents of the ent(s) referred to abov lity as defined in 37 C	above-identific	ed specification	
Foreign Application(s) and		- ·				
inventor(s) certificate liste	d below and I	have also identified below	ates Code Section 119 of any foreign application for p ad:	any foreign applica patent or inventor(s	tion(s) for patent or certificate having a	
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIGRITY CLAIMED	UNDER 36 U # C 119	
				Y E 5	NO	
				YES:	NO	
Provisional Application hereby claim the benefit pelow:	under Title 3	35, United States Code So	ection 119(e) of any United	States provisional	application(s) listed	
South Control of the	APPL	ICATION SERIAL NUMBER	FILING DATE			
25 - ~~						
Medica Sp Growing Special Control of the Control of the Control Control of the Control of the Co						
insofar as the subject material subject material subject in a subject	rst paragraph litle 37, Code	of Title 35, United States of Federal Regulations, S	s Code Section 112, Lackr ection 1.56(a) which occur	nowledge the duty	to disclose material	
APPLICATION SERIAL NU	MBER	FILING DATE	STATUS (p	STATUS (patentod/pendlng/abanduned)		
POWER OF ATTORNEY: As a named inventor, I h business in the Patent and	ereby appoin Trademark Of	t the following attorney(s fice connected therewith	s) and/or agent(s) to prose	cute this application	on and transact all	
Custome	er Number	022879	Place Customor Number Bar Code Label hare			
Send Correspondence t HEWLETT-PACKARD C			Direct Telephone	Calls To:		
Intellectual Property Administration			Scott A. Horstemeyer			
P.O. Box 272400 Fort Collins, Colorado 80527-2400			(770) 933-9500	(770) 933-9500		
I hereby declare that made on information a the knowledge that w	all stateme and belief villful false n 1001 of	are believed to be tru statements and the I Title 18 of the United	my own knowledge and further that the ike so made are punis d States Code and that atent issued thereon.	se statements w	were made with	
Full Name of Inventor: Pa	ul Clinton (Coffin	Citizenship: _US/	Δ		
		nonte Drive Fort Col	lins. CO 80524			
Post Office Address:	WA		1100			
tant to Colh	, 	· · · · · · · · · · · · · · · · · · ·	8-20-0) [

Inventor's Signature Date

DECLARATION AND POWER OF ATTORNEY

DECLARATION AND PO		ATTORNEY DOCKET NO10	ATTORNEY DOCKET NO. 10012828-1		
Full Name of # 2 joint inventor:	Robert L. Mueller	Citizenship: USA			
Residence:	35126 Cornerstone Way, W	lindsor, CO 80550			
Post Office Address:	N/A				
21 -1	e Mulla	08/20/01			
Inventor's Signature	a much	Date Date			
Full Name of # 3 joint inventor:	Gregg S. Schmidtke	Citizenship: USA			
Residence:	4607 Kitchell Way, Fort Collins, CO 80524				
Post Office Address:	N/A				
Then D	from allo	<u>08/20/2001</u>			
Inventor's Signature		Date			
Full Name of # 4 joint inventor:		Citizenship:			
Residence:					
≝ §Post Office Address; ☑					
inventor's Signature		Date			
		Jula			
Full Name of # 5 joint inventor:		Citiconship:			
Residence:	, , , , , , , , , , , , , , , , , , ,				
Post Office Address:					
Inventor's Signature	W	Date			
		2410			
*** Full Name of # 6 joint invantor:		Otal			
		Cittzenship:			
Residence: Post Office Address:					
Inventor's Signature	44-7-1-18	Date	V 1		
Full Name of # 7 joint inventor:		Citizenship:			
Residence:					
Post Office Address:					
Inventor's Signature		Pate			
Full Name of # 8 joint inventor:		Citizenship:			
Residence:					
Post Office Address:					
Inventor's Signature					
		Date			